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(Re	equestor's Name)	
(Ad	ldress)	
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PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name	e)
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Certified Copies	_ Certificates o	of Status
Special Instructions to	Filing Officer:	

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08/28/17--01023--025 **160.00

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Wadsworth Law LLLP

TRIAL ATTORNEYS

14 N.E. 1st Avenue, 10th Floor, Miami, FL 33132 Tel: (305) 777-1000 • Fax: (305) 777-1001 Toll Free: (855) 644-3400

WWW.WADSWORTH-LAW.COM
REPLY TO MIAMI OFFICE

Samuel J. Cdi
Stephen J. Demanovich
Jamie Clark Dixon
Chad A. Klosky
Daniel L. Margrey
Benjamin S. Pahl
John D. Perrault
Katya M. Rehders
Orlando J. Romero
Sahar Rodriguez
Jack R. Siminons
Michael J. Snowden*
Christopher W. Wadsworth

August 24, 2017

Via Federal Express
Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL32301

Re: RAK Risk Management, LLC Documents to register RAK Management LLC as a foreign limited liability company to transact business in Florida

To Whom It May Concern:

Attached hereto are the completed documents to register RAK Risk Management, LLC as a foreign limited liability company to transact business in Florida. RAK Risk Management LLC is duly formed under the laws of the State of Delaware and is in good standing as stated in the attached authentication document.

Enclosed is the filing fee of \$160.00 as requested.

Thank you for your attention. Should you need any further information, please do not hesitate to contact us.

Very truly yours,

Christopher W. Wadsworth

CWW/tfe Taylor Powell Enclosures (as stated)

COVER LETTER

TO;	Registration Section Division of Corporations	
SHRIB	RAK RiskManagement	
30001	Name of Limited Liabi	lity Company
The en- Exister	enclosed "Application by Foreign Limited Liability Company for Auth tence, and check are submitted to register the above referenced foreign	orization to Transact Business in Florida," Certificate of limited liability company to transact business in Florida.
Please	se return all correspondence concerning this matter to the following:	
	Christopher Wadsworth	
	Name of Person	1
	Wadsworth Law LLLP	
	Firm/Company	
	One Flagler Building 14 N.E 1st Avenue10thFloor	
	Address	
	Miami, FL 33132	
	City/State and Zip C	Code
	cw@wadsworth-law.com	
	E-mail address: (to be used for future ar	inual report notification)
For fur	urther information concerning this matter, please call:	
	Christopher W. Wadsworth 305	777-1000
	Name of Contact Person Area C	Ode Daytime Telephone Number
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
Enclose	osed is a check for the following amount: S125.00 Filing Fee S130.00 Filing Fee S155.00 Certificate of Status Certified C	Filing Fee & S160.00 Filing Fee, Certificate of Status & Certified Copy

'APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

State of Delaware 3		Limited Liability Company; must include "Limite	ed Liability Company," "L.L.C.," or "LLC.")	
(Chare first amaneted because in Plands, departite registeration) (Chare for amaneted because in Plands, departite registeration) (Dec section (el), 1988 & 201, 1985; F.S. to decembe penally liability) (See section (el), 1988 & 201, 1985; F.S. to decembe penally liability) (See section (el), 1988 & 201, 1985; F.S. to decembe penally liability) (See section (el), 1988 & 201, 1985; F.S. to decembe penally liability) (See section (el), 1988 & 201, 1985; F.S. to decembe penally liability) (See section (el), 1988 & 201,	name unavailable, enter alternate r	name adopted for the purpose of transacting business in Flo	onda. The alternate name must include "Limited Lial	bility Company," "L.L.C," or "LLC,")
(there for transacted becomes in Planth, if green in equilibration) (See excitons of Norde A and 1990; P.S. to determine penalty liability) (See excitons of Norde A and 1990; P.S. to determine penalty liability) (See a Authers of Principal Offlice) (Auburn, AL 36830 Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Christopher Wadsworth Office Address: Office Address: One Flagler Building 14 NE 1st Avenue 10th Floor Miami (City) Florida Signated in this application. I hereby accept the appointment as registered agent and agree to act in this capacity. I further comply with the provisions of all statutes relative to the proper and complete performance of my duties, and a marking address; and accept the obligations of my position as registered agent. S(Christopher W. Wadsworth (Registered agent's sugmature) The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Title or Capacity: Name and Address; Title or Capacity: Name and Address; Owner Taylor Powell 1138 Terrace Acre Dr. Auburn AL 36830 Auburn AL 36830 Auburn AL 36830 Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in side tion under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under the translator must be submitted) This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false informatic bruitted in a document to the Department of State constitutes a fiird degree felony as provided for in s.N17.155, F.S.	State of Delaware		₃ 47- 4767781	
1138Terrace Acre Dr. (Street Address of Phospal Office) Auburn, AL 36830 Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Christopher Wadsworth Office Address: One-FlaglerBuilding 14NE 1stAvenue10thFloor Miami Florida 33132 (City) Auburn Ali special mined in a secretic agent and to accept service of process for the above stated limited liability company at the signated in this application. I hereby accept the appointment as registered agent and agree to act in this capacity. I florida discretive of the obligations of all statutes relative to the proper and complete performance of my duties, and I am familial discretive of the obligations of my position as registered agent. Signated in this application. I hereby accept the appointment as registered agent and agree to act in this capacity. I florida discretive obligations of my position as registered agent. (Registered agent vignature) The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Title or Capacity: Name and Address: Name and Address: Title or Capacity: Name and Address: Name and Address: Name and Address: Title or Capacity: Name and Address: Name and	(Jurisdiction under the law of w	hich foreign limited liability company is organized)	(FEI numb	ner, if applicable)
1138Terrace Acre Dr. See sections 405,0903, F.S. to determine penalty labelity 138Terrace Acre Dr.		(Date first transacted business in Florida, if prior to	registration.)	
Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Christopher Wadsworth Office Address: OneFlaglerBuilding 14 NE 1stAvenue10thFloor Miami Florida 33132 Zipcosle) registered agent's acceptance: aving been named as registered agent and to accept service of process for the above stated limited liability company at the signated in this application. I hereby accept the appointment as registered agent and agree to act in this capacity. I further comply with the provisions of all statutes relative to the proper and complete performance of my duties, and Lam familian diaccept the abligations of my position as registered agent. S/Christopher W. Wadsworth (Registered agent's signature) The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Title or Capacity: Name and Address: Auburn AL 36830 Jose attachments if necessary) Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in risdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under the translator must be submitted) This document is executed in accordance with section 605.0203 (1) (b). Florida Statutes. I am aware that any false informatic bmitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155. F.S.		(See sections 605,0904 & 605,0905, F.S. to determ	nine penalty liability)	
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Title or Capacity: Name and Address: Title or Capacity: Name and Address: Title or Capacity: Name and Address: Taylor Powell 1138 Terrace Acre Dr. Auburn AL 36830 Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records i risdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under the translator must be submitted) This document is executed in accordance with section 605,0203 (1) (b), Florida Statutes. I am aware that any false information builted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.	comply with the provise	ions of all statutes relative to the proper		duties, and Lam fa mi liar (
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Typed or printed name of signee

Page 1



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "RAK RISK MANAGEMENT, LLC" IS DULY

FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE SEVENTEENTH DAY OF AUGUST, A.D. 2017.

Authentication: 203078209

Date: 08-17-17

*APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

					-
	name adopted for the purpose of transacting i			ability Company," "L.L C," or "LI	C"1
State of Delaware Oursdiction under the law of v	shich toreign limited liability company is orga		7- 4767781 (FEI nuir	nber, (f applicable)	-
	, , , ,			•	
	(Date first transacted business in Flor	nda, if prior to registration)	<u> </u>		
1138Terrace Acre D	(See sections (405 (1904 & 605 (1905)))	• •	^{is)}) Box 3287Auburn, A	VI 38830	
(Street Address of		6. <u>1 C</u>	(Mailing Add	dressi	•
Auburn, AL 36830			<u> </u>		-
	-		 -	·	-
	G21 - 1				
Name and street addre	ss of Florida registered agent: ((P.O. Box <u>NOT</u> acce	ptable)		
Name:	Christopher Wadsworth				
Office Address:	OneFlaglerBuilding 14 NE	1stAvenue10thFloo	or		
	Miami		— ena. 33132		
	(Cu	ty)	, Florida 33132 (Zip cox	de)	
laving been named as re esignated in this applica comply with the provis	gistered agent and to accept so tion, I hereby accept the appo- ions of all statutes relative to the s of my position as registered to	intment as registered the proper and comple agent.	agent and agree to act	t in this capacity. I furt	ier aș
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Typed or printed name of signee



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "RAK RISK MANAGEMENT, LLC" IS DULY

FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE SEVENTEENTH DAY OF AUGUST, A.D. 2017.

Para coro delaware sov/au

Authentication: 203078209

Date: 08-17-17